

ISSUE SIM STATE T- EA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>E.H.</i>		10-18-71
O.I.P.E. CLASSIFIER	<i>R.P.</i>	13	101 30/01
FORMALITY REVIEW	<i>P.D.</i>	1121	11-15-7001

# INDEX OF CLAIMS

✓ ..... Rejected  
= ..... Allowed  
- (Through numeral) Canceled  
+ ..... Restricted  
N ..... Non-elected  
I ..... Interference  
A ..... Appeal  
O ..... Objected

Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

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